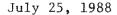
DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814





ALL COUNTY INFORMATION NOTICE 1-70-88

TO: ALL COUNTY WELFARE DIRECTORS
ALL PUBLIC AND PRIVATE ADOPTION AGENCIES
ALL SDSS ADOPTION DISTRICT OFFICES

SUBJECT: ADOPTIVE PLACEMENT AGREEMENT (AD 907)

The Adoptive Placement Agreement form (AD 907) has been revised and updated as a result of changes in statute and regulations. Enclosed is an advance copy of the revised form which may be reproduced for your immediate use.

The revision brings the AD 907 into conformity with recent changes to adoptions regulations and provisions of Assembly Bill 1454, Chapter 360, Statutes of 1987, which eliminated the interlocutory decree of adoption effective January 1, 1988.

Please note that a section has been added to the form specifying whether the child has been legally freed for adoption, and if not, what the child's legal status is. A child may be placed prior to being legally free only under the following conditions:

- 1. Per Manual of Policies and Procedures 70-507.1, the child may be placed in an assessed and approved adoptive home, with the approval of the adoption agency administrator, if the birthmother and presumed father have signed relinquishments, the relinquishments have been filed with the Department, and any action to terminate the rights of any alleged father(s) under Civil Code Sections 7017 or 7006 is pending.
- 2. Per Civil Code Section 239, the court may refer the minor to a licensed adoption agency for adoptive placement during the period that an appeal is pending on a freeing action. The appellate rights of the natural parents must be exhausted before a petition for adoption may be heard.

Please destroy your existing supply of the AD 907 (1/83) and order the revised AD 907 (4/88). County adoption agencies may order the AD 907 by using County Order Form (GEN 727B). State district offices and private adoption agencies may send a request to:

Department of Social Services Warehouse 744 P Street, M.S. 19-20 Sacramento, CA 95814

If you have any questions regarding this notice, please contact Ms. Jennifer C. Smith, Adoptions Policy Consultant, at (916) 323-0470 or ATSS 473-0470.

LOREN D. SUTER Deputy Director

cc: CWDA

Enclosure

ADOPTIVE PLACEMENT AGREEMENT

Child's Name	
Date	e of Birth
L We and	(Adoptive Parent) , understand that
the in accepting	g me/us as adoptive parent(s) expresses confidence in
my/our ability to meet the needs of the child placed with me/us	On
Having seen the child and been informed of his/her social and his adoption. Attached is a Psychological and Medical History Form (All which I/we have reviewed. I/We understand that the agency will migranted. I/We understand that a social worker from the adoption a decree of adoption has been granted by the court.	ealth history, I/we accept him/her with the intent of legal D 512), listing social and health facts applicable to the child aintain legal custody of the child until a decree of adoption is
I/We understand the child is/is not legally freed for adoption. If r	not, the child's legal status is
Until the adoption is final:	
I/We agree to place the child under the care of a licensed physicial including immunization. I/We must notify the agency of any serious writing prior to any necessary surgery or medical treatment for the	illnesses of the child and obtain consent from the agency in
I/We agree to inform the agency of changes in my/our family or plac of California without the consent of the agency and I/we agree to info outside the county.	te of residence. I/We must not take the child out of the State orm the agency of extended trips of 30 days or more I/we take
If for any reason I/we cannot keep the child or properly care for hild. We realize my/our right to terminate the adoptive placement and roof the decree of adoption. If I/we are dissatisfied with any action of the right to request a review of the action(s) of the adoption agencies mediately if the child is endangered or upon seven (7) days notice in the child. The child can only be removed by court approval, or a child can such event, I/we do hereby waive and release any and all can maintenance, and care for the child, and for any damages resulting	eturn the child to the agency at any time prior to the granting be adoption agency before the adoption is finalized, I/we have by. I/We understand that the agency may remove the child if it is determined that such action will be in the best interest Id protective service action, if a petition for adoption has been claims I/we may have against the agency for board, lodging.
/We understand that I/we are responsible for any attorney fees	
/We have been informed of the provisions of the Adoption Assistance	
children does/does not mee	t the definition of a special needs child as defined
(Name of Child) In Welfare and Institutions Code Section 16616. If the child qualifies meet the special needs of the child. I/We have been informed that if mmediately, I/we can sign an adoption assistance agreement that whe specified condition(s) designated in this agreement. I/We unders the Adoption Assistance Agreement and Adoptive Placement Agreement.	for AAP, I/we are/are not in need of financial assistance to the child qualifies for AAP and I/we do not need assistance will defer payment until I/we require financial assistance for tand that adoption assistance payments can begin only after ements have been signed.
n consideration of services rendered to me/us, I/we agree	e to pay to
an adoption fee of \$ by the time the agency reco	mmends the adoption in its report to the court.
/We understand that assistance from California Children's Services is and that any benefits to which I/we may be entitled under that prog/we may be eligible to receive similar benefits in another state if	ram will terminate if I/we move to another state. However,
Agency Representative Ac	ioplive Parent
Agency Representative (cooperative placement) Advantage Advanta	doplive Parent

AD 907 (4-88)

Date Signed